



## Urban Health: A Future Focus for Career Development

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Spending too much time debating whether urban health is a discipline is probably unwise as there are so many definitions of *discipline*. For example, a sampling of definitions includes the following: "A subject area with distinct research methods, terminology and styles of communication"; "A subject that is taught, a field of study"; "Institutionalization of a scientific speciality"; "Institutionalized subdivision of the various activities making up an academy"; "A conceptual framework with paradigmatic structures which are commonly subscribed to by members."<sup>1</sup> Settling on a definition is probably a lengthy debate in itself.

Some would argue that a discipline is an organizational, bureaucratic concept effectively determined by sociopolitical considerations. "An academic discipline is a purely social construct...and one might equally well call it a 'gang,' a 'social network,' 'a peer group' or a 'posse.'"<sup>2</sup> Certainly, Peters,<sup>3</sup> in his seminal book about disciplines (in which he particularly examined cultural studies as a discipline), took a political scientific view. Adopting this view allows more flexibility and change over time.

Here, it is worth noting some national differences that might affect these discussions. Perhaps British academics are less anxious about disciplines than Americans because the awarding of British PhDs is not cited according to a discipline. A PhD certificate may say that the candidate has been awarded a PhD in Urban Health. At the recent International Conference on Urban Health, this approach did not appear odd as some young American students appeared keen to become urban health experts and to use mixed methods (e.g., from epidemiology, anthropology, and geography); however, they also seemed to want reassurance that it is acceptable not to have a "home" in a single one of these traditional disciplines. Is it possible that this reassurance is appropriate for such students in the United Kingdom, but dangerous to do so in the United States? The United Kingdom now has a steady stream of PhDs in urban health, and I do not think that any of my 22 PhD graduates would identify themselves as being an epidemiologist, an anthropologist, a geographer, a political scientist, or an economist. And, they used theories and methods from a variety of these disciplines. The argument that can be made is that urban health is a subdiscipline of public health, and that it may be appropriate not to publish in any journals that are in a narrow discipline, but to choose instead high-impact, multidisciplinary journals such as *Social Science and Medicine* and, of course, our very own disciplinary journal, this one.

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Perhaps the main purpose of defining urban health as a discipline, then, is to give a home and a career path for our young colleagues who are emerging with these impressive and much-needed arrays of skills and knowledge. I am proud of losing my original disciplinary base (of geography, although even my PhD in environmental psychology was joint between geography and psychology) and gaining a new discipline, urban health. Despite one of my early tutor's stern warning that "Trudy, you are in danger of losing your disciplinary base," I have only gained from working in urban health. I am flexible about being regarded as interdisciplinary or multidisciplinary or being in a single discipline of urban health.

The UK government, in its next round of assessing quality of university research, may no longer insist on submissions by traditional disciplines, but enable people to declare themselves as interdisciplinary. In this case, I will be an interdisciplinarian. Here, it is worth noting that more consistency in the use of the terms *multidisciplinary* and *interdisciplinary* would be useful. In development studies, there is some consistency emerging. Thus, when a research project involves individuals from different disciplines (e.g., economics, anthropology, statistics), it is deemed multidisciplinary. When it involves individuals who have skills from a variety of disciplines and who use them in a more integrated way, it is deemed interdisciplinary. Clearly, any discipline needs a conceptual framework. Urban health has a conceptual framework that articulates the demographic, economic, environmental, social, and political characteristics of urbanization and urban life, which in turn are associated with various health outcomes.

I agree with Dr. Guyer<sup>4</sup> that the fundamental problem with disciplines is that they create boundaries. But, the new generation of disciplines tends to be less exclusive (and I refer here again to Peters's<sup>3</sup> assessment of cultural studies and women's studies in the United States) and welcoming of different methods and frameworks. I accept that any discipline with "studies" after its name tends to be devalued by the traditional academic establishment. For example, this is true of educational studies in the United Kingdom. But, if one asks which discipline has most influenced current public policy in the United Kingdom, it is arguably educational studies (with evidence of the impact of preschool education, for example, obliging the Treasury to establish nationwide public preschool provision). In contrast, sociology has been criticized for not informing or influencing public policy in the United Kingdom, and this has made the major government research funding agency reassess its strategy in relation to sociology. As an applied researcher, I care about informing and influencing public policy and practice. I therefore particularly value disciplines that make a difference. There are increasing signs of urban health researchers making a difference, and I must admit, this is ultimately more important to me than a debate about discipline or field.

Dr. Guyer ended with a baseball metaphor. Let me also end on a US culturally based metaphor and say, "Saddle up the urban health posse." And as posse can be defined as a "strong force or company," "May the force be with you."

## REFERENCES

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